REPORTABLE EVENTS TABLE

Vaccine/Toxoid	Event	Interval
Tetanus in any combination; DTaP, DT, Td, TT, DTaP-Hib	A. Anaphylaxis or anaphylactic shock B. Brachial neuritis C. Any sequela (including death) of above events D. Events described in manufacturer's package insert as contraindications to additional doses of vaccine	7 days 28 days No limit See package insert
Pertussis in any combination; DTaP, DTaP-Hib	A. Anaphylaxis or anaphylactic shock B. Encephalopathy (or encephalitis) C. Any sequela (including death) of above events D. Events described in manufacturer's package insert as contraindications to additional doses of vaccine	7 days 7 days No limit See package insert
Measles, mumps, and rubella in any combination; MMR, MR, M, R	A. Anaphylaxis or anaphylactic shock B. Encephalopathy (or encephalitis) C. Any sequela (including death) of above events D. Events described in manufacturer's package insert as contraindications to additional doses of vaccine	7 days 15 days No limit See package insert
Rubella in any combination; MMR, MR, R	A. Chronic arthritis B. Any sequela (including death) of above events C. Events described in manufacturer's package insert as contraindications to additional doses of vaccine	42 days No limit See package insert
Measles in any combination; MMR, MR, M	A. Thrombocytopenic purpurea B. Vaccine-Strain Measles Viral Infection in an immunodeficient recipient C. Any sequela (including death) of above events D. Events described in manufacturer's package insert as contraindications to additional doses of vaccine	30 days 6 months No limit See package insert
Inactivated Polio (EIPV)	A. Anaphylaxis or anaphylactic shock B. Any sequela (including death) of above events C. Events described in manufacturer's package insert as contraindications to additional doses of vaccine	7 days No limit See package insert
Hepatitis B	A. Anaphylaxis or anaphylactic shock B. Any sequela (including death) of above events C. Events described in manufacturer's package insert as contraindications to additional doses of vaccine	7 days No limit See package insert
Haemophilus influenzae type B	A. Early-onset Hib disease B. Any sequela (including death) of above events C. Events described in manufacturer's package insert as contraindications to additional doses of vaccine	7 days No limit See package insert
Varicella	Events described in manufacturer's package insert as contraindications to additional doses of vaccine	See package insert

The Reportable Events Table (RET) reflects what is reportable by law (42 USC 300aa-25) to the Vaccine Adverse Event Reporting System (VAERS) including conditions found in the manufacturer's package insert. In addition, individuals are encouraged to report **ANY** clinically significant or unexpected events (even if you are not certain the vaccine caused the event) for **ANY** vaccine, whether or not it is listed on the RET. Manufacturers are also required by regulation (21 CFR 600.80) to report to the VAERS program all adverse events made known to them for any vaccine. Effective March 24, 1997.